

# CLAIMS ONLY

Application Number

101595459

Filing Date

Applicant(s)

CLAIMS

AS FILED

AFTER FIRST  
AMENDMENT

AFTER SECOND  
AMENDMENT

May be used for additional claims or amendments

Indep Depend

Indep Depend

Indep Depend

Indep Depend

Indep Depend

Indep Depend

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

38

39

40

41

42

43

44

45

46

47

48

49

50

Total

Indep

1

Total

Depend

12

Total

Claims

13

Total

Indep

Total

Depend

Total

Claims